



Los Angeles County
Board of Supervisors

June 22, 2012

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TO: Each Supervisor

FROM: *for* Mitchell H. Katz, M.D.
Director of Health Services

SUBJECT: **ENSURING CONTINUITY OF CARE FOR RYAN
WHITE BENEFICIARIES**

Mitchell H. Katz, M.D.
Director

Hal F. Yee, Jr., M.D., Ph.D.
Chief Medical Officer

Christina R. Ghaly, M.D.
Strategic Planning Deputy Director

On September 20, 2011 your Board directed the Departments of Health Services (DHS), Public Health (DPH) and Mental Health (DMH) to 1) Notify the Board of Supervisors (Board) before any provider agreements or amendments are finalized; 2) Provide bi-weekly reports to the Board on the status of County efforts to obtain a Medicaid Waiver amendment to offset the additional County costs; and 3) Provide the Board offices with a written Ryan White patient care transition plan and monthly reports on efforts to ensure continuity of care.

PROVIDER AGREEMENT NOTIFICATION

On September 30, 2011, DHS notified your Board of its intent to execute amendments to existing Healthy Way LA (HWLA) agreements and enter into new HWLA agreements with seven Ryan White (RW) providers that are not currently part of the HWLA network. On December 21, 2011, DMH notified your Board of its intent to execute Agreements or Amendments with RW providers. DPH will also notify your Board in advance of executing provider agreements related to this matter.

EFFORTS TO OBTAIN MEDICAID WAIVER AMENDMENT

The proposed Waiver amendment is still under review by the federal Centers for Medicare and Medicaid (CMS).

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RYAN WHITE PATIENT CARE TRANSITION PLAN

Transition Timing

The California State Office of AIDS (OA), through its AIDS Drug Assistance Program (ADAP), is now preparing to adjust its eligibility screening process to include Low Income Health Program (LIHP) eligibility as of July 1, 2012. Patients will be transitioned on a monthly basis, according to birth month, as part of their annual redetermination of eligibility for ADAP. Because HWLA application processing takes a few weeks, DHS anticipates that a relatively small volume of patients will actually be enrolled and fully transition to HWLA during July. ADAP benefits will continue while patients are going through the HWLA application process.

Since last fall, DHS, DMH and DPH have been working together closely to put appropriate systems in place to support transitioning HIV patients. As the transition date nears, the Departments have increased communication and training activities for HIV care providers, and are finalizing implementation of the pharmacy network and other critical implementation details as described further below.

DHS Healthy Way LA Contracts

HWLA contracts for current Community Partners (CPs) were updated to include HIV services and add the pharmacy dispensing fee approved by your Board on September 20, 2011. In addition, HWLA contracts were offered to the seven RW providers that were not previously HWLA CPs. DHS made the amendments and contracts available to current and potential CPs for execution by November 1, 2011. At this time, all current HWLA CPs have signed contract amendments. In addition, all seven RW providers that were offered new agreements have signed and are now HWLA CPs. Therefore, transitioning HIV patients in Los Angeles County will not have to change doctors.

Ensuring Access to Pharmaceuticals

Under the leadership of its Chief Pharmacy Officer (CPO), DHS is taking several steps to ensure that medication access is not disrupted for RW patients transitioning to HWLA.

On June 19, 2012, the Board approved authority for DHS to execute a temporary month-to-month contract with Ramsell Public Health Rx for pharmaceutical costs, pharmacy dispensing fees and contract pharmacy administrator services. Ramsell, DHS, and HIV CPs are in the process of implementing the contracted pharmacy network for HIV patients.

Most CPs have signed agreements with Ramsell, and other clinics, including DHS clinics, have agreements in process. These contracts will allow clinics to have expanded pharmacy networks tailored to meet the needs of their patients, and to streamline pharmacy billing and reimbursement processes.

CPs are not required to participate in the Ramsell contract. However, all CPs, regardless of whether they have signed an agreement with Ramsell, are required to provide medically necessary medications to patients as part of their HWLA contracts. DHS has explained this requirement, and CP alternatives to contracting with Ramsell, at provider meetings on March 15 and June 4, 2012; in a provider letter sent May 18, 2012; and during individual outreach to providers.

DHS staff is now working with clinics in various stages of the pharmacy contract process to ensure that they have adequate access to pharmaceuticals for their patients by July 1, 2012.

Ensuring Continuing Access to Specialty Care

Currently RW patients access specialty care in the following ways: 1) referral to DHS; 2) through a network of specialists known as the CHAIN network, funded by DHSP and managed by AIDS Healthcare Foundation (AHF); and 3) onsite at RW provider sites.

DHS has constructed revised HWLA Matched contracts to allow HIV providers to continue to access specialty care through these mechanisms to ensure continuity of care. HWLA referrals to the CHAIN network will be managed through DHSP RW contracts (with billing to HWLA), and will be governed by the same referral protocols and utilization review procedures currently in place for RW contracts. Only HIV-related specialty needs will be referred to CHAIN, which is consistent with the current RW system.

In addition, DHS continues to decompress DHS specialty clinics and increase access for all patients, including those transitioning from RW.

Eligibility Screening and Enrollment for RW Patients

DHS and DPH have developed a process to streamline eligibility screening and enrollment for HWLA-eligible RW patients. Patients will be screened for HWLA during their annual ADAP eligibility screenings, which usually take place at their HIV provider location or an AIDS service organization. This process facilitates HWLA transition for the patient using providers and processes they are already familiar with.

These providers are receiving training from DPH, DHS and OA on changes to the ADAP process, the HWLA program and HWLA screening and enrollment during trainings taking place between June 18 and June 29. This includes training on Your Benefits Now (YBN), the new HWLA enrollment system being rolled out throughout the County.

HWLA resources are also available to providers via DHS' HWLA website www.ladhs.org/hwla, including training videos and materials, all necessary forms and documentation, HWLA brochures, FAQs, and the weekly HWLA enrollment call for all providers and staff. If needed, DHS will provide additional follow-up training after ADAP eligibility workers have gained a few months of experience doing HWLA enrollment.

OA has confirmed that ADAP will fulfill medication needs of Los Angeles County patients for 90 days while their HWLA applications are processed. There are provisions for additional 30 day refills and grace periods under certain circumstances for individuals with unresolved status at the end of the initial grace period.

DHS is also reviewing membership materials provided to new HWLA enrollees to determine if any modifications are needed to information related to selection of medical homes.

Mental Health

HWLA mental health contracts and contract amendments have been executed with Catholic Healthcare West - St. Mary Medical Center, Children's Hospital Los Angeles, the City of Pasadena, the Los Angeles Gay and Lesbian Community Services Center, and Northeast Valley Health Corporation. DMH is presently developing a HWLA contract with the City of Long Beach. One other provider, AIDS Healthcare Foundation, has indicated their intent to execute a HWLA mental health contract, but has not yet done so. Lastly, three providers, The Catalyst Foundation for AIDS Awareness and Care, Miller Children's Hospital at Long Beach Memorial Medical Center, and Watts Healthcare Corporation have declined to execute a HWLA mental health contract. DMH is working with these CPs to establish referral relationships to DMH directly-operated providers for patients in need of specialty mental health services.

RW-Funded Contracts

DHS and DPH have determined that a significant portion of Angelenos living with HIV will continue to rely on a mix of HWLA and RW-supported services in order to thrive. To this end, DHSP will amend relevant contracts to deploy linkage and care coordination services not covered under HWLA. These services will be deployed in the medical homes chosen by patients seeking HWLA/RW-supported HIV medical services.

DHSP is commencing deployment of new contracts for medical outpatient services, as well as new and amended contracts for medical care coordination (MCC). DHSP held a meeting with Ryan White medical outpatient providers on May 22, 2012, at which time the implementation of new medical outpatient services and medical care coordination services were discussed. These new contracts are intended to begin November 1, 2012.

Community Communication Strategy

The three departments have developed a communication strategy to ensure that stakeholders are able to access information regarding the HWLA transition. The communication strategy includes the following:

- On May 18, 2012 DHS sent DHS clinics and CPs a letter updating them on transition timing and process issues.
- On June 4, 2012, the departments hosted their 6th provider information meeting since September to go over transition implementation plans.
- During the second half of June, several trainings will be provided for CP and DHS staff on the HWLA program, eligibility and enrollment procedures for transitioning HIV patients.
- DPH is working in collaboration with the Commission on HIV to develop materials for patients who will be impacted by the transition to HWLA.
- DHS has posted FAQs and other HWLA information on its website.
- DPH has set up an e-mail account for medical providers to submit their HWLA transition questions. Questions will be answered weekly via a Frequently Asked Questions document, now posted on the DHSP website.
- DHS has created an email address providers can use to submit pharmacy-related questions on the transition.
- DHS and DPH have also participated in numerous calls and meetings with pharmacies to answer questions about pharmacy plans for the transition.
- DHS trained HWLA member services representatives to answer questions from transitioning RW clients.

Each Supervisor
June 22, 2012
Page 6

NEXT STEPS

DHS, DPH and DMH will continue working together, and with HIV community providers, to ensure continuity of care for patients transitioning from RW to HWLA; and will provide ongoing status updates to your Board.

If you have any questions or require additional information, please let me know, or you may contact Wendy Schwartz, Director of Board Relations, at 213-240-8104.

MHK:ws

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors